## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10731039

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |  |   |                       |                                   |              |                  |    | SMALL ENTITY TYPE   |   |           | OTHER THAN          |                        |
|--|--|---|-----------------------|-----------------------------------|--------------|------------------|----|---------------------|---|-----------|---------------------|------------------------|
| TC   | OTAL CLAIMS                                    |   | (0010111111)          |                                   | (Colu        | 11111 21         | ı  |                     |   | OR<br>1 : |                     |                        |
| TOTAL OBAING   |  |   | 41                    |                                   |              |                  |    | RATE                | FEE                                     |           | RATE                | FEE                    |
| FC   | )R<br>   |   | NUMBER FILED          |                                   | NUMB         | ER EXTRA         |    | BASIC FEE           | 385.00                                  | OR        | BASIC FEE           | 770.00                 |
| TC   | TAL CHARGEA                                    | ABLE CLAIMS                               | <b>૨૨</b> \ minus 20= |                                   | * 501        |                  |    | X\$ 9=              |   | OR        | X\$18=              | 8126                   |
| IND  | DEPENDENT CI                                   | LAIMS                                     | 3 mi                  | nus 3 =                           | <u></u>      |                  | ,  | X43=                |   | OR        | . X86=              |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |   |                       |                                   | <u>.</u>     | Q/               |    | +145=               |   | OR        | +290=               | 290                    |
| * If the difference in column 1 is less than zero, ente  |  |   |                       |                                   |              | olumn 2          |    | TOTAL               |   | OR        | TOTAL               | 4673                   |
| CLAIMS AS AMENDED - PART II  |  |   |                       |                                   |              |                  |    |                     |   | •         | OTHER               | THAN                   |
|  |  | (Column 1)                                |                       | (Colun                            |              | (Column 3)       |    | SMALL               | ENTITY                                  | OR        | SMALL               | ENTITY                 |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                       | HIGHI<br>NUME<br>PREVIC<br>PAID I | BER<br>OUSLY | PRESENT<br>EXTRA |    | RATE                | ADDI-<br>TIONAL<br>FEE                  |           | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                 | **                                |              | =                |    | X\$ 9=              |   | OR        | X\$18=              |                        |
|  | Independent                                    | *   | Minus                 | ***                               |              | =                |    | X43=                |   | OR        | X86=                |                        |
|  | FIRST PRESE                                    | NTATION OF MI                             | JLTIPLE DEF           | PENDENT                           | CLAIM        |                  |    | +145=               |   | OR        | +290=               |                        |
| TO   |  |   |                       |                                   |              |                  |    |                     |   | OR        | TOTAL<br>ADDIT. FEE |                        |
|  |  | (Column 1)                                | •                     | (Colun                            | on 2)        | (Column 3)       | ,  | ADDIT. FEE          |   |           | ADDII. FEET         |                        |
|  |  | CLAIMS                                    |                       | HIGH                              | EST          | Codumino         | lг |                     | ADDI-                                   | 1         |                     | ADDI-                  |
| AMENDMENT B  |  | REMAINING<br>AFTER<br>AMENDMENT           |                       | NUME<br>PREVIC<br>PAID I          | USLY         | PRESENT<br>EXTRA |    | RATE                | TIONAL                                  |           | RATE                | TIONAL                 |
|  | Total  | *   | Minus                 | **                                |              | =                |    | X\$ 9=              |   | OR        | X\$18=              |                        |
| ME   | Independent                                    | *   | Minus                 | ***                               |              | =                |    | X43=                |   | OR        | X86=                |                        |
| 4  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                       |                                   |              |                  |    |                     | - · - · · · · · · · · · · · · · · · · · |           |                     |                        |
| $oldsymbol{1}$   |  |   |                       |                                   |              |                  |    | +145=               |   | OR        | +290=               |                        |
|  |  |   |                       |                                   |              |                  |    | TOTAL<br>ADDIT. FEE |   | OR        | TOTAL<br>ADDIT. FEE |                        |
|  | <u>, : </u>                                    | (Column 1)                                |                       |                                   |              |                  |    |                     |   |           |                     |                        |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | ·                     | HIGHI<br>NUME<br>PREVIO<br>PAID I | BER<br>OUSLY | PRESENT<br>EXTRA |    | RATE                | ADDI-<br>TIONAL<br>FEE                  |           | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                 | **                                |              | =                |    | X\$ 9=              |   | OR        | X\$18=              |                        |
|  | Independent                                    | *   | Minus                 | ***                               |              | =                |    | X43=                |   |           | X86=                |                        |
| 1  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                       |                                   |              |                  |    |                     |   | OR        |                     |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |  |   |                       |                                   |              |                  |    |                     |   | OR        | +290=               |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEE  |  |   |                       |                                   |              |                  |    |                     |   | OR        | TOTAL<br>ADDIT. FEE |                        |
| ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                       |                                   |              |                  |    |                     |   |           |                     |                        |